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**Testimony on SB 322: AAC The Qualifications of Department of Children and Families Employees  
Select Committee on Children  
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Presented By: Stephen A. Karp, MSW**

The National Association of Social Workers, Connecticut Chapter, representing over 3,300 members, supports the concept and direction of SB 322. The hiring of individuals with a baccalaureate degree (BSW) or master degree (MSW) in social work for the social work positions in Department of Children and Families (DCF) will provide for needed professionalization of DCF's social work staff. Furthermore, it will provide for improved case outcomes, maximize the state's investment in higher education & personnel expenditures, and in this difficult budget period extend the state's investment in the efficient delivery of social work services.

To fully understand state social work job titles one first must know that there are two social worker job classification series for state employment as a social worker. One is the Clinical Social Work Series that requires at least a MSW degree and has done so since 1996. This job series is in accordance with the state's Licensed Clinical Social Worker (LCSW) statute. The second job classification series is the Social Work Series that requires a minimum of a baccalaureate degree in social work or related field (broadly defined) and has allowed for non-social workers to be hired by the State of Connecticut for social work positions. It is this series that includes the vast majority of DCF social workers.

### **The Reasons for Hiring a Professional Social Worker**

Since the late 1980s studies have found that workers with either a BSW or MSW degree in social work outperform those workers in the same jobs who hold non-social work degrees. The key findings of these studies include the following:

- Social work majors had the highest quality assurance ratings and Merit Examination Scores.<sup>1</sup>
- Supervisors rated MSWs as having the highest performance ratings and BSWs the second highest.<sup>2</sup>
- MSWs and BSWs were more effective in permanency planning for children in foster care than workers without a social work degree.<sup>3</sup>
- MSWs and BSWs outperformed non-social work degreed social service workers when dealing with complex cases.<sup>4</sup>

<sup>1</sup> Dhooper, Royse, & Wolfe. Does Social Work Make A Difference? *Social Work*, 35(1), 1990.

<sup>2</sup> Dhooper, Royse, & Wolfe. Does Social Work Make A Difference? *Social Work*, 35(1), 1990.

<sup>3</sup> Albers, Reilly, & Rittner. Children in Foster Care: Possible Factors Affecting Permanency Planning. *Child and Adolescent Social Work Journal*, 10 (4), 1993.

<sup>4</sup> Booz, Allen, & Hamilton. The Maryland social work services job analysis and personnel qualifications study. *Report prepared for the Department of Human Resources, State of Maryland*. 1987.

- In three states that were studied an Agency-University partnership that utilized Title IVE funds found that BSWs and MSWs who received their degree under the training funds remained in the employ of the child agency longer than other workers.<sup>5</sup>
- A National Association of Social Workers (NASW) survey of professional social workers in child welfare agencies found that BSWs and MSWs felt safer making home visits alone; have more tenure and higher interest in remaining in child welfare; and spend a little less time on paperwork compared to non-social work degreed child welfare workers.<sup>6</sup>
- The Child Welfare League of America found that data supports the premise that a social work education is the best preparation for practice in child welfare.<sup>7</sup>

Feedback from our members who work with DCF workers informs us that the caseworkers without social work degrees often do not understand the clinical issues involved in their cases. For example, one school social worker told me that she has to constantly explain family dynamics to the DCF worker. Another member who works in the community for a non-profit agency with a DCF contract said that it undermines her effectiveness when the DCF worker lacks the clinical assessment skills and understanding to assist her in developing the clinical supports the clients need. We consistently hear from social workers in the field that in the last five years they are seeing far greater mental health needs amongst children, which speaks to the need for child welfare workers to have strong backgrounds and experience in clinical assessment and treatment.

Given the state's fiscal crisis it is also cost effective to hire professionally degreed social workers. Cases will have improved outcomes that should lead to less need for future interventions, fully qualified workers are able to be more efficient in their work and the state salary is the same regardless of degree. Thus State of Connecticut will gain more "bang for the buck" by employing BSWs and MSWs for DCF social work positions.

## **Social Work Education and Training**

Professional social workers must complete a rigorous curriculum that includes ten core competencies, augmented by forty-two practice behaviors, determined by the national Council on Social Work Education (CSWE), in order to earn a BSW or MSW degree (master degrees have additional practice behaviors based on specializations). Social workers are educated in a 'person in environment' approach to social work that assures the most holistic approach to working with clients. This unique perspective helps social workers to not only assist people in reaching their full potential, but also contributes to building healthy and productive families and communities. Social workers have specific skills and knowledge base in working with individuals, families, groups, organizations and communities that grounds the social worker in a much broader understanding of client needs than does a worker with a related degree. Professional social workers have the advantage of having completed field internship(s) under the supervision of a professional social worker and integrated into the curriculum, which means even a new graduate arrives with real world experience. Most related degrees do not have supervised field internships. Only BSWs and MSWs practice under the *NASW Code of Ethics*, which serves as a guide to the professional conduct of social workers and as a protection to employers and consumers.

Connecticut has two Graduate Schools of Social Work and six Undergraduate Programs that respectively graduate approximately 300 Graduate (MSW) and 200 Undergraduate (BSW) social workers annually. In

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<sup>5</sup> U.S. General Accounting Office (GAO). Child Welfare: HHS could play a greater role in helping child welfare agencies recruit and retain staff. 2003

<sup>6</sup> National Association of Social Workers. If You're Right for the Job, It's the Best Job in the World. June, 2004.

<sup>7</sup> Child Welfare League of America. Research Roundup, Child Welfare Workforce, September 2002.

addition, we estimate another 150-200 Connecticut students annually graduate from schools in New York and Massachusetts and return to Connecticut to practice. These graduates provide a significant pool of highly qualified applicants for state social work positions, who do not require the additional expense to the state of being trained as to the practice of social work after being hired.

One of the key reasons that Connecticut has a highly trained social work workforce is that both of the MSW programs and four of the BSW programs in Connecticut are in our public universities. The state is appropriately investing significant resources to assure that Connecticut has a sufficient pool of social workers to meet the state's need for social work services. Thus it is ironic, and to us inexplicable that DCF does not fully utilize the investment Connecticut makes in social work training.

One argument that we have heard for hiring non-social workers is that DCF offers training to all newly hired social workers and provides ongoing training to current social work staff. Such an emphasis on training is to be applauded however no training program can replace the sound educational foundation that is attained with a social work degree. While we commend DCF for its training academy, for which NASW/CT approves much of the training for continuing education credits, we must emphasize that continuing education is not equivalent to having a social work degree. The DCF Training Academy can advance the ongoing education of DCF's social workers but such training can only be fully effective when the social worker already has the foundation of the social work degree. If a non-physician were to take Continuing Medical Education trainings it would not make them qualified to practice medicine. The same is true for social work.

Degrees that are related to social work do not have consistent educational requirements from school to school. Nor do related degrees typically have supervised internships that provide for real life job training. DCF would not hire an individual with a degree in human biology (arguably a related degree) to practice nursing, so why hire related degrees to practice social work?

Commissioner Katz told the Hartford Courant, in an interview published on February 13, 2011 (For DCF, New Leader And New Direction), that she is telling her social work staff that "if you take educated risks, if you follow the policies, and at the end of the day you make a decision, I will protect you". We applaud this approach by the Commissioner and at the same time make note that "educated risks" are best made by those with the fullest education in their practice field.

### **Precedence for Requiring a Social Work Degree**

In 1995 the State Legislature passed the Licensed Clinical Social Work (LCSW) law that required clinical social work be performed only by MSWs and LCSWs. At the time the State of Connecticut employed both MSWs and individuals with related degrees as "Psychiatric Social Workers". With the passage of the LCSW statute the State of Connecticut was given until October 1, 1996 to come into compliance. The State allowed current employees without the social work degree to remain in employment under a new classification of Community Clinician. Employees without the MSW were encouraged to attain the MSW degree and many of these employees did so. Just as the State of Connecticut professionalized the Clinical Social Work Classification it is now time for the State to professionalize the Social Worker Classification by requiring a BSW or MSW degree.

### **Revisions to SB 322**

The original proposal for SB 322 was to have the qualifications for DCF social workers be a BSW or MSW degree. It furthermore called for the BSWs to attain a MSW within five years of hiring and for the MSW to attain a social work license within five years of receiving the MSW. NASW/CT supports the hiring by DCF

of only BSWs and MSWs for social work positions, with requirements for BSWs to attain the MSW and for MSWs to become licensed. We note that in 2010 the Legislature passed the Licensed Master Social Work and once this new licensure program is funded in DPH that all MSWs will be immediately eligible to sit for the exam upon receiving their MSW degree. This will allow DCF to hire LMSWs for all master level positions.

NASW/CT does not support the current language in SB 322 that continues to allow the hiring of related degrees at the master level. A related degree, even at the master level, is not the same as a social work degree. Furthermore, SB 322 appropriately requires by 2020 that all MSWs have a social work license and related degrees are not eligible for social work licensure.

NASW/CT seeks to have implementation language that clarifies that the requirement of hiring BSWs and MSWs would be effective for new hires only as of the effective date of the bill. Just as the State did in 1996, we support a hold harmless provision that allows current workers without the social work degree to maintain their current position.

## **Conclusion**

The Child Welfare League of America in the overview of their report *Child Welfare Workforce* (September 2002), states “No issue has greater effect on the capacity of the child welfare system to effectively serve vulnerable children and families than the shortage of a competent and stable workforce”. In Connecticut it is not so much a shortage of a quality workforce as it is a shortage of good hiring practices that has led to a social work workforce at DCF that is lacking in professionally trained social workers. Professional social workers who become employed by DCF are often discouraged by the lack of recognition of the social work degree, which leads many to leave the agency. An adequate professional social work workforce does however exist in Connecticut and with adequate recruitment it can be employed for the betterment of our state’s children and families. This however will apparently only happen if the Legislature directs DCF to solely employ professional social workers for DCF’s social work positions.

Upon the passage of SB 322 NASW/CT stands ready to offer the State of Connecticut assistance in the identification and recruitment of BSWs and MSWs. Such assistance was provided when the Behavioral Health Partnership was initiated and through the efforts of NASW/CT a sufficient number of Licensed Clinical Social Workers were recruited as providers. We have no doubt that given the opportunity NASW/CT could successfully encourage recruitment of qualified social workers for social work positions within DCF.

The problem with DCF social work staffing emanates from the State’s hiring process that allows non-social workers to be employed as social workers. We do not blame individual workers for accepting child welfare positions for which they are not fully qualified. We do however hold the State of Connecticut responsible for hiring practices that ignores the professional standards of the social work profession. The State does not hire psychologists with related degrees, they do not hire nurses with related degrees, they do not hire physicians with related degrees and it is finally time for the State to stop hiring social workers with related degrees.

DCF has faced court orders, program plans, goals and objectives, and benchmarking, but at the end of the day it is the quality, education, skills, knowledge and capabilities of the social work staff that will determine the Department’s outcomes. Now is the time to start the professionalization of the DCF social work staff.